

**SECRET**  
*(When Filled In)*

VOUCHER NO. 7-12		(When Filled In) REQUEST FOR PAYMENT AND POSTING VOUCHER										VOUCHER NO. 7-12				
TO : Finance Division, Accounts Branch THROUGH: Monetary Branch												DIVISION VOUCHER NO. 27Mar63 2610				
Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.																
SUBJECT																
PAYMENT TO		INVOICE NO(S). <i>50,51,52</i>														
AMOUNT		CONTRACT NO. <i>HF-CJ-2219</i>														
<input checked="" type="checkbox"/> CASH PAYMENT		<input checked="" type="checkbox"/> U.S. TREASURY CHECK		AGENT CASHIER CHECK				BANK CASHIER'S CHECK				CHECK TO BE DATED				
THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ <b>11,749.05</b>												SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.				
I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.																
DATE	SIGNATURE OF PAYEE			DATE		SIGNATURE OF AGENT				DATE		SIGNATURE OF RECIPIENT				
DESCRIPTION-ALL OTHER ACCOUNTS 13-33			34-39 STATION CODE		40-42 EXPEND CODE		43 F	45-46 PAY PER.	47-52 OBLIG. REF. NO.	53 CA	54-57 GENERAL LEDGER ACCT. NO.	58-67 ALLOT. OR COST ACCT. NO.		68-70 DUE DATE	71-80 AMOUNT	
DESCRIPTION- ADVANCE ACCOUNTS 13-27			28-33 T/A NO.	P.O. NO.	PROJ. NO.	FY	U N D S	LIO. CODE	EMP. NO.	YR	X REF. NO.	62-67 CK. NO.	OBJECT CLASS	DEBIT	CREDIT	
<i>Eastman Kodak Co</i>						871	7		2217	6010	61-1057-0175	740	949.02 ✓			
						871	7		2219	6010	61-10571-0008	740	8800.03 ✓			
										138.G				<i>9749.05</i>		
<i>Originating Address</i>														<i>+ Contract # HF-CJ-2219 (P021)</i>		
<i>1 - Voucher</i>																
DATE	AUTHORIZED CERTIFYING OFFICER <i>SIGNS</i>										DATE	TOTALS				
27 Mar 63												9,749.05				
														9,749.05		

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

D. O. VOU. NO. \_\_\_\_\_

Use continuation sheet(s) if necessary

BU. VOU. NO. \_\_\_\_\_

Page 1 of 1

U. S. \_\_\_\_\_

(Department, bureau, or establishment)

Voucher prepared at \_\_\_\_\_

(Give place and date)

Payee's Account No. \_\_\_\_\_

Discount Terms \_\_\_\_\_

TO Eastman Kodak Company

(Payee)

(Address)

Rochester, New York

PAID BY

Contract No. HF-CJ-2219 Date Req. No. Date Invoice Rec'd.  
Shipped from to Weight Govt. B/L No.

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	Quantity	UNIT PRICE		AMOUNT
				Cost	Per	
		<u>Invoice Number</u>				
		50 (Orig. Inv. Att)				\$2,655.79
		51 (Orig. Inv. Att)				2,920.18
		52 (Orig. Inv. Att)				4,173.08
				TOTAL		\$9,749.05

(PAYEE MUST NOT USE THIS SPACE)

PAYMENT:

COMPLETE

PARTIAL

FINAL

PROGRESS

ADVANCE

DIFFERENCES \_\_\_\_\_

Amount verified; correct to  
(Signature or initials) 9,749.05

† Approved for \_\_\_\_\_ = \$ \_\_\_\_\_

By \_\_\_\_\_

Title \_\_\_\_\_

Exchange rate \_\_\_\_\_ = \$1.00

that  
nt.  
27/1965 STAT

(Date)  
ing Officer)

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE

ACCOUNTING CLASSIFICATION (Appropriation Symb

Paid by Check No. \_\_\_\_\_ on Treasurer of the United States  
Check No. \_\_\_\_\_ on \_\_\_\_\_ (Name of Bank)

Cash, \$ \_\_\_\_\_, on \_\_\_\_\_, 19 \_\_\_\_\_ Payee \_\_\_\_\_

Per \_\_\_\_\_

Title \_\_\_\_\_

\* When used in foreign countries, insert name of currency of country in which used.

† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ \_\_\_\_\_", and over his official title.